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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/005,328			ling Date 07/2001	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
	FOR	ı	NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)	T	RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A		N/A		1	N/A		
	SEARCH FEE (37 CFR 1.16(k), (i), (ii)		N/A		N/A		N/A		1	N/A		
	EXAMINATION FE (37 CFR 1.16(o), (p),	EE	N/A		N/A		N/A	,	1	N/A		
	TAL CLAIMS CFR 1.16(i))		minus 20 =		•		x \$ =		OR	x \$ =		
IND	DEPENDENT CLAIM CFR 1.16(h))	1S	minus 3 =				x \$ =		1	x \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	Sheris \$; add 35 t	ets of pap 250 (\$125 itional 50 J.S.C. 41(ngs exceed 100 on size fee due) for each on thereof. See CFR 1.16(s).								
Ш	MULTIPLE DEPEN								4			
* If 1	the difference in colu	umn 1 is less thai	ı zero, ente	er "0" in column 2.			TOTAL		j	TOTAL		
	APPLICATION AS AMENDED – PART II (Column 1) (Column 2) (Column 3)						SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
AMENDMENT	03/30/2007	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
Ĭ	Total (37 CFR 1.16(i))	• 8	Minus	~ 20	= 0]	x \$ =		ОR	X \$50=	0	
	Independent (37 CFR 1.16(h))	• 3	Minus	***8	= 0]	x \$ =		OR	X \$200=	0	
AM	Application Size Fee (37 CFR 1.16(s))											
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR	[]		
2/2/2						• -	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0	
7	3/ <i>D/</i> 0/	(Column 1)	•	(Column 2)	(Column 3)	_	·				· · · · · · · · · · · · · · · · · · ·	
_/ ⊢	/	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	· B	Minus	- 20	= —] [x \$ =		OR	x \$ =		
AMENDMEN	Independent (37 CFR 1.16(h))	. 3	Minus	 8	= ,—] [x \$ =		OR	x \$ =		
$\bar{\Pi}$	Application Size Fee (37 CFR 1.16(s))											
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. " If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "" If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

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